

# NEBRASKA BOARD OF PUBLIC ACCOUNTANCY

**P.O. Box 94725**  
**Lincoln, NE 68509-4725**  
**(402) 471-3595**

## ADDRESS CHANGE FORM

Rule 007.06 of Chapter 5 requires every certificate holder to notify the Board in writing **within thirty days** of any change of address or change of employment. The Board will not change your mailing address without written authorization from you. Notifying the Nebraska Society of CPAs of an address change will **not** change the mailing address on file with the Board. Return this form to: Board of Public Accountancy, P.O. Box 94725, Lincoln, NE 68509.

**Name** \_\_\_\_\_ **Certificate #** \_\_\_\_\_

**Home Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Fax** \_\_\_\_\_ **E-mail** \_\_\_\_\_

**Work Name** \_\_\_\_\_

**Work Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Fax** \_\_\_\_\_ **E-mail** \_\_\_\_\_

Use **Home** ☐ or **Work** ☐ for Mailing Address?

**Effective Date** \_\_\_\_\_